

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>men</i>		06-06-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	A-S	943	6-15-1
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	X		7/9/2001
2	X		8/21/2001
3	X		8/21/2001
4	X		8/21/2001
5	X		8/21/2001
6	X		8/21/2001
7	X		8/21/2001
8	X		8/21/2001
9	X		8/21/2001
10	X		8/21/2001
11	X		8/21/2001
12	X		8/21/2001
13	X		8/21/2001
14	X		8/21/2001
15	X		8/21/2001
16	X		8/21/2001
17	X		8/21/2001
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47	X		8/21/2001
48	X		8/21/2001
49	X		8/21/2001
50	X		8/21/2001

Claim	Final	Original	Date
51	X		8/21/2001
52	X		8/21/2001
53	X		8/21/2001
54	X		8/21/2001
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97	X		8/21/2001
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99	X		8/21/2001
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Claim	Final	Original	Date
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103	X		8/21/2001
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146	X		8/21/2001
147	X		8/21/2001
148	X		8/21/2001
149	X		8/21/2001
150	X		8/21/2001

If more than 150 claims or 10 actions  
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